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# HOUSE BILL No. 1200

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## DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 16-18-2; IC 16-21-6-6; IC 16-39-5-3.

**Synopsis:** Patient reports and records. Requires a hospital to file quarterly patient specific information reports with the state department of health. Provides for disclosure of health records in connection with voluntary public health activities.

**Effective:** July 1, 2002.

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## Dillon, Brown C

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January 10, 2002, read first time and referred to Committee on Public Health.

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Introduced

Second Regular Session 112th General Assembly (2002)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2001 General Assembly.

## HOUSE BILL No. 1200

A BILL FOR AN ACT to amend the Indiana Code concerning health.

*Be it enacted by the General Assembly of the State of Indiana:*

1       SECTION 1. IC 16-18-2-91.3 IS ADDED TO THE INDIANA  
2 CODE AS A **NEW** SECTION TO READ AS FOLLOWS  
3 [EFFECTIVE JULY 1, 2002]: **Sec. 91.3. "Data aggregation" has the**  
4 **meaning set forth in IC 16-39-5-3(b).**

5       SECTION 2. IC 16-18-2-168, AS AMENDED BY P.L.127-2001,  
6 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
7 JULY 1, 2002]: Sec. 168. (a) "Health records", for purposes of  
8 IC 16-39, means written, electronic, or printed information possessed  
9 by a provider concerning any diagnosis, treatment, or prognosis of the  
10 patient. The term includes mental health records and alcohol and drug  
11 abuse records.

12       (b) For purposes of ~~IC 16-39-5-3(d)~~, **IC 16-39-5-3(e)**, the term  
13 includes information that describes services provided to a patient and  
14 a provider's charges for services provided to a patient.

15       (c) The term does not include information concerning emergency  
16 ambulance services described in IC 16-31-2-11(d).

17       SECTION 3. IC 16-21-6-6 IS AMENDED TO READ AS

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FOLLOWS [EFFECTIVE JULY 1, 2002]: Sec. 6. ~~(a)~~ In addition to the report filed under section 3 of this chapter, each hospital shall, **not more than one hundred twenty (120) days after the end of each calendar quarter**, file with the state department, ~~before May 1 of each year a report for the hospital's preceding calendar year disclosing the following or the state department's designated contractor, inpatient and outpatient discharge information on a form at the patient level, in a format prescribed by the state health commissioner, including the following:~~

(1) The number of inpatient and outpatient admissions and discharges by patient, diagnosis including:

(A) Medicare admissions;

(B) Medicaid admissions;

(C) admissions under a local government program;

(D) charity care admissions; and

(E) any other type of admission.

(2) (1) The average patient patient's:

(A) length of stay; by patient diagnosis:

(B) diagnoses and surgical procedures performed during the patient's stay;

(C) date of:

(i) admission;

(ii) discharge; and

(iii) birth;

(D) type of admission;

(E) admission source;

(F) gender;

(G) race;

(H) discharge disposition; and

(I) payor, including:

(i) Medicare;

(ii) Medicaid;

(iii) a local government program;

(iv) commercial insurance;

(v) self-pay; and

(vi) charity care.

(2) The total charge for the patient's stay.

(3) Average charge for each discharge by patient diagnosis: The ZIP code of the patient's residence.

(4) Daily room rates.

(5) Number of primary surgical procedures.

(b) The data required to be disclosed under subsection (a) shall be

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1 reported for each major payor category, including Medicare, Medicaid,  
2 and private paying patients.

3 SECTION 4. IC 16-39-5-3, AS AMENDED BY P.L.231-1999,  
4 SECTION 15, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE  
5 JULY 1, 2002]: Sec. 3. (a) As used in this section, "association" refers  
6 to an Indiana hospital trade association founded in 1921.

7 (b) As used in this section, "data aggregation" means a  
8 combination of information obtained from the health records of a  
9 provider with information obtained from the health records of one  
10 (1) or more other providers to permit data analysis that relates to  
11 the health care operations of the providers.

12 (c) Except as provided in IC 16-39-4-5, the original health record of  
13 the patient is the property of the provider and as such may be used by  
14 the provider without specific written authorization for legitimate  
15 business purposes, including the following:

- 16 (1) Submission of claims for payment from third parties.
- 17 (2) Collection of accounts.
- 18 (3) Litigation defense.
- 19 (4) Quality assurance.
- 20 (5) Peer review.
- 21 (6) Scientific, statistical, and educational purposes.

22 ~~(c)~~ (d) In use under subsection ~~(b)~~, (c), the provider shall at all times  
23 protect the confidentiality of the health record and may disclose the  
24 identity of the patient only when disclosure is essential to the provider's  
25 business use or to quality assurance and peer review.

26 ~~(d)~~ (e) A provider may disclose a health record to another provider  
27 or to a nonprofit medical research organization to be used in  
28 connection with a joint scientific, statistical, or educational project.  
29 Each party that receives information from a health record in connection  
30 with the joint project shall protect the confidentiality of the health  
31 record and may not disclose the patient's identity except as allowed  
32 under this article.

33 ~~(e)~~ (f) A provider may disclose a health record or information  
34 obtained from a health record to the association for use in connection  
35 with a voluntary scientific, statistical, or educational data aggregation  
36 project undertaken by the association. However, the provider may  
37 disclose the identity of a patient to the association only when the  
38 disclosure is essential to the project. The association may disclose the  
39 information it receives from a provider under this subsection to the  
40 state department to be used in connection with a voluntary scientific,  
41 statistical, or educational project undertaken jointly by the association  
42 and the state department if the association and the state department

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1 have agreed to the project's scope, nature, and duration. **public health**  
 2 **activity.** The information disclosed by:

- 3 (1) a provider to the association; or  
 4 (2) the association to the state department;

5 under this subsection is confidential.

6 ~~(f)~~ **(g)** Information contained in final results obtained by the state  
 7 department for a voluntary ~~scientific, statistical, or educational project~~  
 8 ~~undertaken jointly by the state department and the association~~ **public**  
 9 **health activity** that:

- 10 (1) ~~uses is based on~~ information disclosed under subsection ~~(e)~~  
 11 **(f)**; and  
 12 (2) identifies or could be used to determine the identity of a  
 13 patient;

14 is confidential. All other information contained in the final results is  
 15 not confidential.

16 ~~(g)~~ **(h)** Information that is:

- 17 (1) advisory or deliberative material of a speculative nature; or  
 18 (2) an expression of opinion;

19 including preliminary reports produced in ~~the course of a voluntary~~  
 20 ~~scientific, statistical, or educational project undertaken jointly by the~~  
 21 ~~state department and the association~~ **connection with a voluntary**  
 22 **public health activity** using information disclosed under subsection  
 23 ~~(e)~~ **(f)**, is confidential and may only be disclosed by the state  
 24 department to the association and to the provider who disclosed the  
 25 information to the association.

26 **(i) The association shall, upon the request of a provider that**  
 27 **contracts with the association to perform data aggregation, make**  
 28 **available information contained in the final results of data**  
 29 **aggregation activities performed by the association.**

30 ~~(h)~~ **(j)** A person who recklessly violates or fails to comply with  
 31 subsections ~~(d)~~ **(e)** through ~~(g)~~ **(h)** commits a Class C infraction. Each  
 32 day a violation continues constitutes a separate offense.

33 ~~(i)~~ **(k)** This chapter does not do any of the following:

- 34 (1) Repeal, modify, or amend any statute requiring or authorizing  
 35 the disclosure of information about any person.  
 36 (2) Prevent disclosure or confirmation of information about  
 37 patients involved in incidents that are reported or required to be  
 38 reported to governmental agencies and not required to be kept  
 39 confidential by the governmental agencies.

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